

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) R2184.0528/P528		
Application Number	10/590,945-Conf. #2612	Filed August 28, 2006		
For INFORMATION RECORDING/REPRODUCING DEVICE AND INFORMATION RECORDING/REPRODUCING METHOD				
Art Unit	2621	Examiner H. T. Nguyen		
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.				
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):				
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	Fee \$130	Small Entity Fee \$65	\$ 130.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$ _____
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$ _____
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$ _____
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-1073</u> .				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>33,082</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34.				
Registration number if acting under 37 CFR 1.34 <u>Mark J. Thronson</u> <u>+62,450</u>				
<u>Signature</u> <u>March 1, 2010</u> <u>Mark J. Thronson</u> <u>Date</u> <u>Typed or printed name</u> <u>(202) 420-4742</u> <u>Telephone Number</u>				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
<input checked="" type="checkbox"/>	Total of <u>1</u> forms are submitted.			